

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P01000110510

1. Entity Name

RUBICAM STRATEGIC ALLIANCE, INC



FILED

03 APR 30 PM 1:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

Savelovskaya St., 15

3. Mailing Address

1455 Tallevast Rd.

Suite, Apt. #, etc.

3rd Fl., 341

Suite, Apt. #, etc.

Suite L8319

City & State

Moscow

City & State

Sarasota, Florida

DO NOT WRITE IN THIS SPACE

4. FEI Number

Applied For

☒ Not Applicable

Zip

Country

Russia

Zip

34243

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name Joseph Evans

Street Address (P.O. Box Number is Not Acceptable)

1455 Tallevast Rd., Suite L 8319

City Sarasota

FL

Zip Code
34243

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Jose A. ...

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

04/18/03

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

Director

Irvin Boncamper

Heritage Plaza, #532, Main Street

Charlestown, Navis, West Indies

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

200017339462

04/30/03--01006--001 **150.00

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

President

Beruska Sanchez

Heritage Plaza, #532, Main Street

Charlestown, Navis, West Indies

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

Secretary

Yolanda S. de Samaniego

Heritage Plaza, #532, Main Street

Charlestown, Navis, West Indies

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:

Yolanda S. de Samaniego

Yolanda S. de Samaniego

04/18/03

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/02)